

L12000020726 ✓

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

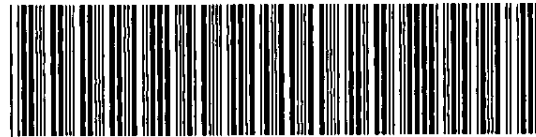
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



000235796670

06/06/12--01013--013 **25.00

FILED
12 JUN - 6 AM 11:47
DEPARTMENT OF STATE
TALLAHASSEE, FLORIDA

B. BOSTICK

JUN - 7 2012

EXAMINER

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: LA CHIKI LLC

(Name of Limited Liability Company)

The enclosed member, managing member or manager resignation and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to:

Angelica Beltran

(Contact Person)

BELTRAN ACCOUNTING SERVICES CORP

(Firm/Company)

6303 BLUE LAGOON DR SUITE 400

(Address)

MIAMI FL 33126

(City/State and Zip Code)

For further information concerning this matter, please call:

Angelica Beltran

(Name of Contact Person)

at (305) 456-1999

(Area Code & Daytime Telephone Number)

Enclosed please find a check made payable to the Florida Department of State for:

☒ \$25 Filing Fee

☐ \$55 Filing Fee &
Certified Copy

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, Florida 32301

MAILING ADDRESS:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

RECEIVED
DEPARTMENT OF STATE
TALLAHASSEE, FLORIDA

12 JUN -6 AM 11:47



FLORIDA DEPARTMENT OF STATE
DIVISION OF CORPORATIONS

**RESIGNATION OF MEMBER, MANAGING MEMBER OR MANAGER
FROM FLORIDA OR FOREIGN LIMITED LIABILITY COMPANY**

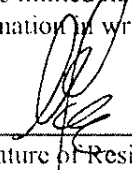
1. The name of the limited liability company as it appears on the records of the Florida Department of State is: LA CHIKI LLC

2. This limited liability company was organized under the laws of:
FLORIDA

3. The Florida document/registration number of this limited liability company is:
L12000020726

4. I, MARIA A. SUAREZ, hereby resign as a MGRM
(Print Name of Person Resigning) *(Print Title)*

of this limited liability company and affirm the limited liability company has been notified of my resignation in writing.


Signature of Resigning Member, Managing Member or Manager

12 JUN -6 AM 11:47
TALLAHASSEE, FLORIDA